

**INSTRUCTIONS FOR  
CALIBRATION APPOINTMENT REQUEST FORM  
FORM NO. RMT-001**

In order to obtain a calibration appointment, submit a completed and signed request to the Texas Department of Agriculture (TDA) Metrology Laboratory. You will be notified of the date and time of the appointment via letter that will be sent to the company appearing under Section A of this request.

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**Incomplete forms will be returned, delaying your calibration appointment.  
Only use forms with the same revision date shown at the bottom of the currently posted online form.**

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**Submit request to:**

Mail: Texas Department of Agriculture, P.O. Box 1518, Giddings, Texas 78942  
Email: Metrology@TexasAgriculture.gov - PREFERRED  
Fax: (888) 205-7741

**NOTE: A separate form should be submitted for each appointment needed.**

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**SECTION A**

**1. COMPANY INFORMATION**

This information will be used to generate your company's appointment.

- If there is a change in any company information, please check the box indicated and complete a Regulatory Change Template A Form (R-001). This form can be accessed online at [www.TexasAgriculture.gov](http://www.TexasAgriculture.gov)
  - Enter the full legal business name.
  - Enter date by which the appointment is needed.
  - Companies that do not hold a TX Weights & Measures service company license: mark "No"
  - Companies that are applying or currently hold a TX W&M service company license: mark "Yes"
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**SECTION B**

**NOTE: All spaces provided in Section B must be completed unless otherwise marked "if applicable."**

**1. PERSON TO CONTACT FOR APPOINTMENT RELATED MATTERS**

Indicate name of the person to contact regarding appointment related matters. Enter contact information. All correspondence, certifications, and other documents will be sent to the person listed as the contact for appointment related matters.

**2. PERSON TO CONTACT FOR TECHNICALLY RELATED MATTERS**

Indicate name of the person to contact regarding technical related matters. Enter contact information. All technical questions will be sent to the person listed as the contact for technical related matters.

**3. MAILING ADDRESS**

Enter the address at which the person to contact receives general correspondence.

**4. PHYSICAL/SHIPPING ADDRESS**

If the physical/shipping address is the same as in section B-3, check the box that indicates same as mailing address above. If address is different than the mailing address enter the physical/shipping address for the company named in Section A in the space provided.

**5. INVOICE ADDRESS**

If the invoice address is the same as in section B-3, check the box that indicates same as mailing address above. If company name or address is different than the mailing address, enter the invoice address in the space provided.

**NOTE:** The Person to Contact for Appointment Related Matters, named by the company in Section B of this form, is the preferred signatory in Section D of this application.

**NOTE:** The Person to Contact for Technical Related Matters, named by the company in Section B of this form, must be authorized by the responsible person who signs Section I of this application.

**SECTION C**

**NOTE:** Equipment not listed on the form will not be calibrated at the time appointment unless prior arrangements are made with our office.

**1. INVENTORY INFORMATION – List Equipment Previously Certified by TDA**

Please list all equipment that **has** been previously certified by TDA for which your company is requesting calibration.

- Calibration class information should be provided as per NIST handbook 105 series specifications and requirements. Contact the Metrology Lab prior to submission if other classifications of artifacts are to be submitted. The Giddings Metrology Laboratory holds Mass Echelon III and Volume Transfer II recognition. For more information on scope of services, see the certificate at <https://www.nist.gov/pml/weights-and-measures/state-laboratories-c/state-laboratories-t-v>
- LPG provers require additional time to calibrate, therefore it is important to indicate

**2. INVENTORY INFORMATION –List Equipment Not Previously Certified by TDA**

Please indicate all equipment that **has not** been previously certified by TDA for which your company is requesting calibrations.

**Example:**

Each row can only be one specific nominal.

NOMINAL (weight/measure)	Qty.	Calibration Class (weights only)
50 lb	10	F

The above example indicates the company is scheduling 10 – 50 lb. weights calibrated to class F.

**NOTE:** If additional inventory space is needed use RMT-001A Calibration Appointment Request – Schedule A.

**SECTION D**

**1. SIGNATURE**

Print and sign your name, and date the form. Your signature here indicates that you have read the request and you certify that the information entered into this appointment request is true and correct to the best of your knowledge and is subject to verification by TDA.

**SECTION E**

**1. SAFETY INFORMATION**

Indicate if items being submitted for calibration have been exposed to harmful materials. Indicate if the items being submitted for calibration have been properly cleaned and are safe for human handling.

**SECTION F**

**1. SPECIAL INSTRUCTIONS**

List any special instructions regarding your items submitted for calibration.

**SECTION G**

**1. SHIPPING INFORMATION**

Indicate if the items being submitted for calibration will be shipped in. If yes, ensure that artifacts arrive prior to calibration appointment. Include a return shipping label with shipment.

**SECTION H**

**1. MODIFICATION INFORMATION**

In the table, list the serial numbers and a detailed description of any items being submitted for calibration that have been repaired, modified or altered in any way. Be as descriptive as possible.

- Beginning December 1, 2017, weight cart maintenance logs must be completed and submitted with the weight cart. This is a mandatory requirement. See the metrology lab website for more information.

**NOTE: If additional space is needed, please attach a sheet with the information.**

**SECTION I**

**1. SIGNATURE**

Print and sign your name. Enter your title, phone number and date the form. Your signature here indicates that you attest that all of the information entered into this calibration authorization form is true and correct to the best of your knowledge and is subject to verification by TDA. This section is to be signed by the person in authority who is the responsible officer, partner, manager, or owner, as described in the Regulatory Change Template A, R-001.